



# Maryland

CHAPTER

Maryland Chapter  
American College of Cardiology

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January 13, 2014

Mr. Ben Steffen  
Executive Director  
Maryland Health Care Commission  
4160 Patterson Avenue  
Baltimore, MD 21215

Re: Recommendations on Implementation of Health-General §19-121.1  
(Senate Bill 750/House Bill 1141 – 2012 Session); Cardiac Surgery and Percutaneous  
Coronary Interventions, COMAR, 10.24.17

Dear Director Steffen:

On behalf of the Maryland Chapter of the American College of Cardiology and on behalf Yuri Deychak, MD, FACC, and Staff Warren, MD, FACC, who are members of the Clinical Advisory Group (CAG) that developed the report before the Legislature, we would like to submit our comments to the above report with the following recommendation.

We appreciate all the extensive and diligent work done by the CAG and the excellent report. We have been strong advocates for external peer review in light of the stent crisis and originally offered legislation to deal directly with this issue that was the genesis of the legislation that resulted in this report.

We do wish to express our deep concern that we do not want to see another incident in our state. We believe that the current recommendation that external review occur only on a yearly basis is not good policy. See, Page 16 of the PCI Report, .06 (Certificate of Conformance Criteria) A5(c), "A hospital shall conduct an annual external review of at least five percent of randomly selected PCI cases and internal review of at least 10 percent of randomly selected PCI cases performed within the past 12 months." (Emphasis added).

For example, if concerns about performance occur in January 2014 at Hospital X, that hospital will not compile data through December 2014 for external review until at least January 2015 and it will be months later in 2015 before an external peer review is completed. We do not believe that it was the intent of the legislature to allow external review to occur maybe a year and a half after questionable procedures would have happened. We suggest a bright line requirement of at least quarterly external review on an annual basis. We believe that there can be no ambiguity in the requirement and that minimal, uniform standards across the board should be expected from the health care providers.

We hope that the regulations will be revised accordingly. We look forward to greater collaborative effort to provide the best outcomes for the patients and the best professional guidance for the providers and continue to make Maryland a national leader in cardiovascular care.

Sincerely,

A handwritten signature in black ink, reading "Marc A. Mugmon MD". The signature is fluid and cursive, with the "MD" at the end being more distinct.

Marc Mugmon, MD, FACC  
President

Cc: Chairman Thomas M. Middleton  
Chairman Peter A. Hammen